

APPLICATION FOR SOLICITOR'S LICENSE

Name _____

Application Fee: \$ 2.00

Social Security No: _____ Date of Birth _____

License Fee:

Per Person/year \$ 10.00

Permanent Address _____

Local Address _____

Business Address _____

Employer _____

Nature of Business _____

Last three (3) Cities or Towns in which you Conducted Soliciting:

Physical Description of Applicant (See attached photocopy of personal identification).

Age _____ Height _____ Weight _____ Hair Color _____ Eye Color _____

I plan to Peddle _____ in Business and/or Residential areas
(kind of merchandise)

from _____ to _____.

I understand that if granted a license, I may solicit only between the hours of 8:00 am and 6:00 pm, and that my license must be in my possession at all times while I am doing business in Carlisle, and must be presented to prospective customers upon request.

Vehicle Make & Model: _____

(Signature of Applicant)

Plate Number & State: _____

Vehicle Owner: _____

Driver Name: _____

Driver Cell No.: _____